The number of caregivers supporting people with cancer was estimated to be 2.8 million in 2015 (National Alliance for Caregiving, 2016). Friend or family caregivers are individuals identified by the patient (Stenberg, Ruland, & Miaskowski, 2010) who provide unpaid assistance with chronic or disabling conditions, such as cancer (American Cancer Society, 2017; National Alliance for Caregiving, 2016). Engaging informal caregivers to provide symptom management can support patients with serious conditions (Reinhart, Given, Petlick, & Bemis, 2008). However, the time and type of activities devoted to caregiving may affect caregivers’ psychological, physical, and social health outcomes (Bevans & Sternberg, 2012; Girgis et al., 2013; Given, Given, & Sherwood, 2012; Northouse et al., 2013; Weiss et al., 2016). Integrative therapies, also known as complementary and alternative medicine (CAM), provide

Purpose/Objectives: To determine the effects of delivering a reflexology intervention on health outcomes of informal caregivers, and to explore whether intervention effects are moderated by caregiver characteristics.

Design: Two-group, randomized clinical trial.

Setting: Eight oncology clinics in urban and rural regions of Michigan and Illinois.

Sample: 180 informal caregivers of patients with advanced breast cancer.

Methods: Caregivers were randomized to provide reflexology to individuals with cancer during a four-week period or to attention control. Data collection occurred at baseline and at weeks 5 and 11. Linear mixed-effects modeling was used to test intervention effects among all participants and the effects of the number of sessions delivered in the reflexology group.

Main Research Variables: Caregiver characteristics; psychological, physical, and social outcomes.

Findings: Caregiver fatigue in the reflexology group was reduced compared to controls at weeks 5 (p = 0.02) and 11 (p = 0.05). No differences were found for anxiety, depression, pain, physical function, sleep disturbance, satisfaction with participation in social roles, and pain interference between caregivers who delivered reflexology and those who did not.

Conclusions: Informal caregivers who provided reflexology to individuals with cancer did not have negative psychological, physical, or social outcomes. Fatigue levels were lower among caregivers who provided reflexology.

Implications for Nursing: Clinicians need to be aware that providing supportive care interventions, such as reflexology, to reduce symptom burden does not increase negative outcomes on informal caregivers who provide this care, and it may even lead to reduced fatigue.